## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |             |                               |                              |                  |    | SMALL ENTITY TYPE   |                        | OR | OTHER<br>SMALL      |                        |
|---|---|---|-------------|-------------------------------|------------------------------|------------------|----|---------------------|------------------------|----|---------------------|------------------------|
| TOTAL CLAIMS  |   |   | 38          |                               |                              |                  |    | RATE                | FEE                    |    | RATE                | FEE                    |
| FOR   |   |   | NUMBER      | FILEO                         | NUMBER EXTRA                 |                  |    | BASIC FEE           | 385.00                 | OR | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 38 min      | us 20=                        | • 1                          | 8                |    | X\$ 9=              | 162.00                 | OR | X\$18=              |                        |
| INE   | EPENDENT CL   | AIMS                                      | .,3 mi      | nus 3 =                       | * <                          | <u> </u>         | -  | X43=                | ·                      | OR | X86=                |                        |
| ML  | ILTIPLE DEPEN                                       | DENT CLAIM P                              | ESENT       |                               |                              |                  |    | +145=               |                        | OR | +290=               | ,                      |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |   |             |                               |                              |                  |    | TOTAL               | 547.00                 | OR | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |   |   |             |                               |                              |                  |    | SMALL E             | ENTITY                 | OR | OTHER<br>SMALL      |                        |
| AMENDMENT A   | 1 4 1   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | . 41                                      | Minus       | #2                            | 0                            | = 21             |    | X\$ 9=              | 36                     | OR | X\$18=              |                        |
| MEN   | Independent   | • 5                                       | Minus       | ***                           | 3                            | = 3              |    | X43=                | 86                     | OR | X86=                |                        |
| L   | FIRST PRESE   | NTATION OF MI                             | JLTIPLE DEI | PENDEN                        | CLAIM                        |                  | J  | +145=               |                        | OR | +290=               |                        |
|   |   |   |             |                               |                              |                  |    | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE |                        |
|   |   | (Column 1)                                |             | (Colu                         | mn 2) .                      | (Column 3)       |    |                     |                        |    |                     | ••                     |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | NŲŲ<br>PREVI                  | HEST<br>BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus       | **                            |                              | =                |    | XS 9=               |                        | OR | X\$18=              |                        |
|   | Independent   | •   | Minus       | ***                           |                              | <del>_</del>     | 1  | X43=                |                        | OR | X86=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM      |   |             |                               |                              |                  | j  | -145=               |                        | OR | +290=               |                        |
|   |   |   |             |                               |                              |                  |    | TOTAL               |                        | OR | TOTAL<br>ADDIT. FEE |                        |
|   |   | (Column 1)                                |             | (Colu                         | mn 21                        | (Column 3        | ì. |                     |                        |    | ·                   |                        |
| AMENDMENT.C   |   | CLAIMS REMAINING AFTER AMENDMENT          |             | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   |   | Minus       | 4+4                           |                              | =                |    | XS 9=               | Ť                      | OR | XS18=               |                        |
|   | Independent   | *   | Minus       | <del>(111</del>               |                              | <u> -</u>        | 4  | X43=                |                        | OR | X86=                |                        |
| [   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 145= |   |             |                               |                              |                  |    |                     |                        | OR | +290=               |                        |
| TOTAL   |   |   |             |                               |                              |                  |    |                     |                        | OR | TOTAL               |                        |
| "If the entry in column 1 is less than 1 in the "Highest Number Previously Paid For" IN THIS SPACE is less than 2 enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |             |                               |                              |                  |    |                     |                        |    |                     |                        |